For use by Members, officers, and employees  202-225-1688 HAN (Daytime Telephone)  Termination  Termination  Termination  THESE QUESTIONS  In you, your spouse, or a dependent child receive any reporting period (i.e., aggregating more than \$335 and nexempt)?  If yes, complete and attach Schedule VI. Did you, your spouse, or a dependent child receive any reporting period (i.e., aggregating more than \$335 and nexempt)?  If yes, complete and attach Schedule VII. Did you, your spouse, or a dependent child receive any reporting period (i.e., aggregating more than \$335 and nexempt)?  If yes, complete and attach Schedule VII. Did you, your spouse, or a dependent child receive any reporting period (worth \$335 from one source)?  If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with entity?  If yes, complete and attach Schedule VIII.  No VIII. current calendar year?  If yes, complete and attach Schedule VIII.  If yes, complete and attach Schedule VIII.  No VIII. current calendar year?  If yes, complete and attach Schedule VIII.  Pold you have any reportable agreement or arrangement with entity?  If yes, complete and attach Schedule VIII.  No VIII. current calendar year?  If yes, complete and attach Schedule VIII.  Pold you have any reportable agreement or arrangement with entity?  If yes, complete and attach Schedule VIII.  No VIII. current calendar year?  If yes, complete and attach Schedule VIII.  Pold you have any reportable agreement or arrangement with example of the complete of the date	. Yes No	ncome, transactions, or liabilities of a spouse or dependent child yes" unless you have first consulted with the Committee on Ethics	Exemptions- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethic
Members, officers, and employees  202-225-1688 HAN (Daytime Telephone)  Employing Office:  Employing Office:  Employing Office:  spouse, or a dependent child receive any reportable and attach Schedule VI.  spouse, or a dependent child receive any reportable and attach Schedule VIII.  any reportable positions on or before the date dar year?  Diete and attach Schedule VIII.  any reportable agreement or arrangement with a support of the agr		ttee on Ethics and certain other "excepted trusts" need not be ust benefiting you, your spouse, or dependent child?	Trusts Details regarding "Qualified Blind Trusts" approved by the Committee disclosed. Have you excluded from this report details of such a t
Members, officers, and employees  202-225-1688 HAN (Daytime Telephone)  Employing Office:  Employing Office:  ination Date:  ination Date:  spouse, or a dependent child receive any reportable and attach Schedule VI. spouse, or a dependent child receive any reportable positions on or before the date and attach Schedule VIII. any reportable agreement or arrangement with a supportable and attach Schedule IX.	IONS		LUSION OF SPOUSE, DEPENDENT, OR TRUST INFORM
Members, officers, and employees  202-225-1688 HAN (Daytime Telephone)  Employing Office:  Employing Office:  Employing Office:  Spouse, or a dependent child receive any reportable and attach Schedule VII.  any reportable positions on or before the date dar year?  Diete and attach Schedule VIII.  any reportable agreement or arrangement with any reportable agreement or arrangement with this part must be answers.		schedule attached for each "Yes" response.	If yes, complete and attach Schedule V.
Members, officers, and employees  202-225-1688 HAN  (Daytime Telephone)  Employing Office:  Employing Office:  Employing Office:  spouse, or a dependent child receive any reportable and attach Schedule VII.  any reportable positions on or before the date dar year?  Siete and attach Schedule VIII.  any reportable agreement or arrangement with a supplement agreement	nd the appropriate		Did you; your spouse, or a dependent child have any reportable liability  Yes No   No
Members, officers, and employees  202-225-1688 HAN  (Daytime Telephone)  Employing Office:  Employing Office:  Employing Office:  spouse, or a dependent child receive any reportable and attach Schedule VI.  spouse, or a dependent child receive any reportable positions on or before the date dar year?  Settle and attach Schedule VIII.  any reportable positions on or before the date dar year?		If yes, complete and attach Schedule IX.	if yes, complete and attach Schedule IV.
Members, officers, and employees  202-225-1688 HAN (Daytime Telephone)  Employing Office:  Employing Office:  ination Date:  spouse, or a dependent child receive any reported (i.e., aggregating more than \$335 and not period (worth the source)?  Sette and attach Schedule VIII.  any reportable positions on or before the date in dar year?	Yes 🗸		8
Members, officers, and employees  202-225-1688 HAN (Daytime Telephone)  Employing Office:  Employing Office:  spouse, or a dependent child receive any reporter and attach Schedule VI.  spouse, or a dependent child receive any reporter and attach Schedule VII.  securce)?	Yes No	Old you hold any reportable positions on or before the date of filin VIII. current calendar year?  If yes, complete and attach Schedule VIII.	<
Members, officers, and employees  202-225-1688 HAN  (Daytime Telephone)  Employing Office:  ination Date:  spouse, or a dependent child receive any repoperiod (i.e., aggregating more than \$335 and notes and attach Schedule VI.	Yes No		Yes No
Members, officers, and employees  202-225-1688 HAN  (Daytime Telephone)  Employing Office:  ination Date:  spouse, or a dependent child receive any report of (i.e., aggregating more than \$335 and n		If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.
Members, officers, and employees  202-225-1688 HAN (Daytime Telephone)  Employing Office:  iination Date:	Yes 🗌 No	Did you, your spouse, the reporting period (	<
For use by Members, officers, and employees  202-225-1688 HAN  (Daytime Telephone)  Coefficer Or Employing Office: Employee  Termination Date:		QUESTIONS	LIMINARY INFORMATION ANSWER EACH OF THESE
For use by Members, officers, and employees  202-225-1688 HAN  (Daytime Telephone)  Officer Or Employing Office:	ore than 30 days	Termination Date:	Annual (May 15)   Amendment
For use by Members, officers, and employees  202-225-1688 HAN  (Daytime Telephone)	\$200 penalty shall e assessed against envone who files	Employing Office:	Member of the U.S. State: House of Representatives District:
For use by Members, officers, and employees  202-225-1688 <b>HAN</b>	(Office take SMX) E.D.	(Daytime Telephone)	(Full Name)
For use by Members, officers, and employees	DET TENER BLATIVES		Raymond Eugene 'Gene' Green
Dans	2011 MAY 12 AM 10: 40	FORM A Page 1 of 6 11 GI For use by Members, officers, and employees 20	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

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SCHEDULE I - EARNED INCOME	Name Raymond Eugene 'Gene' Green	en	Page 2 of 6
List the source, type, and amount of earned income from any source (other than the filer's current emplo during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only \$1,000.		yment by the U.S. Government) totaling \$200 or more the source for other spouse earned income exceeding	\$200 or more come exceeding
Source	Туре	Amount	
Employees Retirement System of Texas Legislative Pension	e Pension	\$51,862	
Teachers Retirement System of Texas Spouse Pension	ension	N/A	
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SCHEDULE III
- ASSETS
AND "UNE
EARNED"
INCOM

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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME		Name Raymond Eugene 'Gene' Green		Page 3 of 6
	BLOCK A	вгоск в	вгоск с	вгоск р	BLOCK E
ASS Identify (a) ea	Asset and/or Income Source (a) each asset held for investment or production of income with a	Year-End	Type of income Check all columns that	Amount of Income For retirement accounts that	Transaction Indicate if asset
fair market va (b) any other more than \$2	fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	at close of reporting year. If you use a valuation method other	apply. For retirement accounts that do not allow you to choose specific investments or that	do not allow you to choose specific investments or that generate tax-deferred income furth as 401/kh plane or	had purchases (P), sales (S), or exchanges (E)
Provide comp symbols.)	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	than fair market value, please specify the method used. If an	generate tax-deferred income (such as 401(k)	IRAS), you may check the "None" column. For all other assets indicate the category	in reporting year.
For all IRAs a self-directed	For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e.,plans in which you have the power, even if not	asset was sold and is included only because	check the "None" column. Dividends, interest, and	of income by checking the appropriate box below.	<u> </u>
exercised, to self asset held in the retirement account the institution ho reporting period.	exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.	It is generated income, the value should be "None."	capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income	Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or reported.	
For rental or address.	For rental or other real property held for investment, provide a complete address.		period.	Services.	
For an owner publically tra	For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.				
Exclude: You vacation hom period); any o	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or				
JT	Bank of America	\$100,001 - \$250,000	INTEREST	\$201 - \$1,000	
	Chase Bank (IRA) - Allstate Preferred Preference Annuities	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	·
SP	Chase Bank (IRA) - Allstate Preferred Preference Annuities	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	
JT	Common Stock, Prudential Financial	None	DIVIDEND & CAPITAL GAIN	\$5,001 - \$15,000	S
	Community Bank of Texas (IRA)	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
SP	Community Bank of Texas (IRA)	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	

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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME		Name Raymond Eugene 'Gene' Green		Page 4 of 6
SP	Prudential Financial	\$100,001 - \$250,000	INTEREST & DEFERRED COMP	NONE	

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## SCHEDULE IV - TRANSACTIONS

Name Raymond Eugene 'Gene' Green

Page 5 of 6

transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange

	SP, DC, JT
Common Stock, Prudential Financial	Asset
S	Type of Transaction
Yes	Capital Gain in Excess of \$200?
10/19/2010	Date
\$1,001 - \$15,000	Amount of Transaction

## **SCHEDULE IX - AGREEMENTS**

Name Raymond Eugene 'Gene' Green

Page 6 of 6

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
05/90	Intl Typographical Union	Pension upon Retirement